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SECKETARY OF STATE TALL AHASSEF, FLORIDA

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COVER LETTER

TO: Registration Division of C		e de la companya del companya de la companya del companya de la co	
DEPLO.	RABEAR TEDDY BEAR LLC		
DEPLORABEAR TEDDY BEAR LLC DEPLORABEAR TEDDY BEAR LLC			
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Rebecca Franklin		
	Courson & Stam	Name of Person	
	2398 Sadler Road	Firm/Company	
	Fernandina Beach, FL 320	Address	
	accountspecialist(i) courson:	City/State and Zip Code	
		·	fication)
For further information	n concerning this matter, please of	all:	
Rebecca Franklin			
Nam	e of Person	Area Code Daytime	: Telephone Number
Enclosed is a check fo	r the following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO ARTICLES OF ORGANIZATION OF

DEPLORABEAR TEDDY BEAR LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 5/20/19 and assigned Florida document number 1.19000135501 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Innovative Creations of Amelia Island LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Act
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Effective date, if other than the (If an effective date is listed, the date mus Note: If the date inserted in this ble document's effective date on the Dotthe record specifies a delayed	at be specific and cannot be proceed does not meet the approperatment of State's record effective date, but	rior to date of filing or more the dicable statutory filing req rds.	uirements, this date wi	ll not be listed
) The 90th day after the reco	ord is filed.			
Dated	<u> </u>	tus		
	Signature of a member or au	uthorized representative of a	member	
Mebeura Re	becca J.	Frankline inted name of signee		

Page 3 of 3

Filing Fee: \$25.00